Form B 21 Official Form 21 (12/03)
(As adapted for use in the U.S. Bankru Northen District of New York)

## United States Bankruptcy Court Northern District of New York

In re:		Case No
		Chapter
Debtor(s) _		
	STATEMENT OF SOCIAL SECURITY	NUMBER(S)
1. Name of	Debtor (enter Last, First, Middle):	
(Check the	appropriate box and, if applicable, provide the req	uired information.)
	Debtor has a Social Security Number and it is: (If more than one, state all.)	
O	Debtor does not have a Social Security Number	
2. Name of	Joint Debtori (enter Last, First, Middle):	
(Check the	appropriate box and, if applicable, provide the req	uired information.)
	Joint Debtor has a Social Security Number and it is:(If more than one, state all.)	
	Joint Debtor does not have a Social Security Number.	
I declare un	der penalty of perjury2 that the foregoing is true and	l correct.
х		
_	Signature of Debtor	Date
<b>X</b>		
	Signature of Joint Debtor	Date